

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD047701203	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address SILICON GENERAL 11651 Monarch, Garden Grove, Ca. 92641				A. State Manifest Document Number 84345401				
4. Generator's Phone (714) 898-8121				B. State Generator's ID CAD047701203				
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES				C. State Transporter's ID 701735				
6. US EPA ID Number CAD042245001				D. Transporter's Phone 213/698-0991				
7. Transporter 2 Company Name				E. State Transporter's ID				
8. US EPA ID Number				F. Transporter's Phone				
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. Whittier Blvd Whittier, Ca. 90602				G. State Facility's ID CAD042245001				
10. US EPA ID Number CAD042245001				H. Facility's Phone 213/698-0991				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit	1. Waste No.		
a. WASTE CORROSIVE LIQUID N.O.S. Corrosive Material			No. 02	Type DM	100	G	211	
b. (Microstrip) UN 1760								
c.								
d.								
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above d99					
15. Special Handling Instructions and Additional Information								
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.								
Printed/Typed Name Dave Kiklas				Signature Dave Kiklas		Date Month Day Year 12 22 86		
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name Tim Battiera		Signature Tim Battiera		Date Month Day Year 12 22 86
18. Transporter 2 Acknowledgement or Receipt of Materials				Printed/Typed Name		Signature		Date Month Day Year
19. Discrepancy Indication Space								
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.								
Printed/Typed Name STEVEN SIMPSON				Signature Steve Simpson		Date Month Day Year 12 22 86		